



# **Class Registration Form**

Name \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

## **PLEASE REGISTER ME FOR THE FOLLOWING CLASS (ES):**

1. Name of Class \_\_\_\_\_

Date & Time \_\_\_\_\_ Class Fee \_\_\_\_\_

2. Name of Class \_\_\_\_\_

Date & Time \_\_\_\_\_ Class Fee \_\_\_\_\_

3. Name of Class \_\_\_\_\_

Date & Time \_\_\_\_\_ Class Fee \_\_\_\_\_

4. Name of Class \_\_\_\_\_

Date & Time \_\_\_\_\_ Class Fee \_\_\_\_\_

5. Name of Class \_\_\_\_\_

Date & Time \_\_\_\_\_ Class Fee \_\_\_\_\_

Total Class Fee \_\_\_\_\_

Please enclose a check made payable to Biba Inc..

Please call Karen to register prior to mailing in form and payment as classes may already be full.

Cancellations: We reserve the right to cancel classes with enrollments of eight students or less.

